

## Neighborhood Watch: Working Together to Ensure Adults are Vaccinated

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## Adult Immunization

The Twilight Zone....  
Beyond the 19<sup>th</sup> Birthday!



The Hopelessly Lost



Large Challenges,  
Large Opportunities

## Disease Burden

- Influenza disease burden varies year to year
  - Millions of cases; average hospitalization 226,000
  - 3000-49,000 deaths annually; 90% among adults
- Invasive pneumococcal disease (IPD)
  - 39,750 cases/4000 deaths in 2010 (all ages)
  - 86% of IPD cases/nearly all related deaths in adults
- Zoster (Shingles) disease
  - Approximately 1 million cases annually in U.S.
- Human Papillomavirus disease
  - 79 million cases, most in persons in late teens/early 20's
  - 14 mil new cases/year
- Pertussis disease
  - 48,277 reported cases; over 1 million cases

## Fast Facts: Vaccination Rates

- National vaccination rates:
  - Tdap: aged 19-64 years is 15.6%
    - Those living with an infant less than age 1 year = 25.9%
  - Zoster : aged 60 years/older is 20.1%
  - HPV 3+ doses: aged 19-26 years is 34.5%

Noninfluenza Vaccination Coverage Among Adults — United States, 2012: MMWR  
February 7, 2014 / 63(05):95-102

## Addressing Disparity Challenges

Adults Aged 65 Years/Older	MI 2013 Rates <sup>1</sup>
Flu vaccine in 2013 (overall)	56.8%
--Whites	59.0%
--Blacks	40.0%
1+ PPSV23 by 2013 (overall)	68.6%
--Whites	70.6%
--Blacks	52.5%

- Health Care Personnel receiving a flu vaccine in 2013-14<sup>2</sup>:
  - Hospital = 89.6%
  - Long Term Care = 63.0%

<sup>1</sup>Behavioral Risk Factor Surveillance System (BRFSS) 2013 Data; www.cdc.gov/brfss  
<sup>2</sup>Influenza Vaccination Coverage Among Health Care Personnel—U.S., 2013-14 Influenza Season  
MMWR, Sept 19, 2014, 63(37)

## Ashley's Story

- 23-year-old nanny
- Positive flu result too late for her to be treated with antivirals
- Fever spiked on Christmas
- Developed pneumonia
- Even healthy, young adults can die from the flu.
- www.theashleymccormickflufoundation.com



www.michigan.gov/flu ->  
Flu gallery

National Adult and Influenza Immunization Summit

## WHAT IS AN IMMUNIZATION NEIGHBORHOOD?

## “Won’t You Be My Neighbor?”

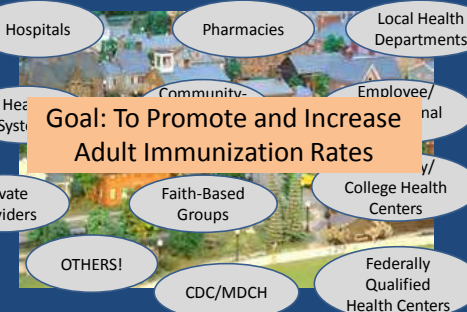
Mr. Roger’s Make-Believe Neighborhood



Daniel Tiger’s Neighborhood

## The Immunization Neighborhood Partners in Health

Goal: To Promote and Increase  
Adult Immunization Rates



National Vaccine Advisory Committee (NVAC) 2013

## THE STANDARDS FOR ADULT IMMUNIZATION PRACTICE

### Immunizing Adult Patients: New Standards for Practice

#### Overview A Series on Standards for Adult Immunization Practice

1. Assess
2. Share
3. Administer
4. Refer
5. Document

### 1 Vaccine Needs Assessment

A Series on Standards for Adult Immunization Practice

#### 1. Vaccine Needs Assessment

Assess vaccine status  
at every clinical  
encounter to decrease  
missed opportunities

## Facts about Adults and Medical Visits

- According to the 2010 U.S. Census data:
  - 82% had contact with a Health Care Provider that year
  - 55.5% of visits = Primary Care Provider

By Age Group	Number of Visits per 100 Persons
All ages	332
Age 25-44 years	256
Age 45-64 years	371
Age 65-74 years	624
Age 75 years +	715

- Most frequent illness: Cough
- Most frequent diagnosed condition: Essential Hypertension

<http://www.cdc.gov/nchs/fastats/physician-visits.htm>

## 2013 Michigan Data<sup>1</sup>

- Number of adults who had a routine check-up in 2013:
  - Aged 18-49 years = 61.2%
  - Aged 50 years/older = 79%



<sup>1</sup>Behavioral Risk Factor Surveillance System (BRFSS) 2013 Data  
[www.cdc.gov/brfss](http://www.cdc.gov/brfss)



## 2. Give a Strong Recommendation

## Provider Side of Messaging

- Health Care Personnel (HCP) commonly discuss with their patients:
  - Consequences of not being vaccinated
  - Safety and efficacy
  - Possible side effects
  - Benefits
- HCPs believe that vaccination is the adult's choice and are reluctant to be "pushy"
  - Unless they perceive the VPD to be potentially very serious

## Targeted Messages

- Adults:
  - Favor simple, concise, direct and to-the-point messages
  - React positively to messages that stress prevention or encourage vaccination as a way have control over their health (proactive)
  - Prefer empowering messages—ones that provide information that can help them make an informed decision
  - Value references to HCPs and messages that urge them to talk to their HCP to determine which vaccines are right for them

## S•H•A•R•E

- SHARE** tailored reasons why recommended vaccines are right given age, health status, occupation, lifestyle or other risk
- HIGHLIGHT** your own experiences with vaccination to reinforce the benefits/strengthen confidence in vaccination
- ADDRESS** patient questions and concerns about vaccines, including side effects, safety, and vaccine effectiveness in plain and understandable language
- REMIND** that vaccines protect them and their loved ones from many common and serious diseases
- EXPLAIN** potential costs of getting the disease, including serious health effects, time lost (i.e., missing work or family obligations), and financial costs

## Examples of Targeted Messages: CDC

**Consequences**

**Susceptibility**

## Examples of Targeted Messages: MDCH

**Benefits (Proactive)**

**Benefits (Empowering)**

**3. Vaccine Administration**

Have all vaccines available at clinic site (Preferred Practice)

## Visits Based on Provider Specialty

- General/Family Medicine
  - 70.4 visits/100 persons
- OB/Gyn
  - 63.7 visits/100 persons
- Internal Medicine
  - 46.1 visits/100 persons



## Vaccine Availability Makes a Difference!



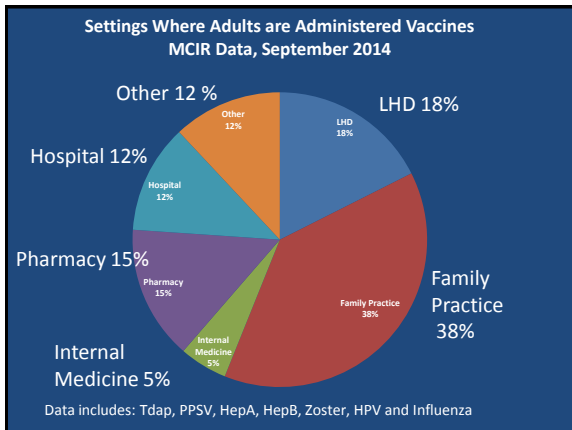
When pregnant women received:	% Vaccinated
Flu recommendation; Offer of vaccine	70.5%
Flu recommendation; No offer of vaccine	32.0%
No flu recommendation; No offer of vaccine	9.7%

Influenza Vaccination Coverage Among Pregnant Women—U.S., 2013–14 Influenza Season, MMWR September 2013 Vol. 63(47)

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**4. Vaccine Referral**

Be prepared to give an informed referral for vaccines not stocked within your clinical site



## Referral Options in the Neighborhood

- Primary Care Provider (PCP)
  - Opportunity: More adult vaccines than specialists
  - Challenge: May not carry all recommended vaccines
- Specialists
  - Opportunity: Certain vaccines based on their specialty
  - Challenge: Generally don't carry all/most vaccines
- Local Health Department (LHD)
  - Opportunity: Likely to have adult vaccines available
    - Limited Federally-funded vaccines for persons without insurance coverage
  - Challenge: May not have mechanism to bill insurance

- Pharmacy
  - Opportunity: Tend to carry most/all adult vaccines; most accessible hours
  - Challenge: May not be covered provider under insurance
- Federally Qualified Health Centers (FQHC)
  - Opportunity: Tend to have adult vaccines available
    - Limited federally-funded vaccines for persons without insurance coverage
  - Challenge: May have to become an established patient
- Other neighborhood partners
  - Employee/Occupational Health, University Health Centers,
  - Flu Clinics: Visiting Nurse Associations, Health System-based, pharmacy groups, community or faith-based clinics
  - Others

## Reality Check 101



Melissa Due  
Feb. 25, 2014

Shared information with  
Melissa/MDCH Flyer

Tdap recommendation  
from family (me!)

OB Nurse  
recommends  
Tdap  
post-partum

Obstetrician gave  
a "1000%"  
recommendation  
to receive Tdap  
during  
pregnancy

## Seeking Tdap Vaccine

OB Office  
No Tdap  
Available



LHD  
Had Tdap  
Limited hours  
Doesn't bill  
insurance

Pharmacy  
Had Tdap  
Good Hours  
Not Covered  
Benefit

Primary Doctor  
Had Tdap  
Open on Sat.  
Bills insurance  
Requires visit  
co-pay



"Snowiest" Winter in Metro Detroit Area---Ever Recorded!!



## Reality Check—Do Over?



Susan  
Due April 13, 2015



OB Physician  
& Staff  
recommendation  
to receive Tdap  
during pregnancy

OB Office  
Tdap  
Available  
Covered by  
health plan



5. Document all  
administered vaccine  
doses into the  
Michigan Care  
Improvement Registry  
(MCIR)

## Some facts about MCIR

- Number of individual adults in MCIR
  - 6 million
- Number of individual shot records
  - 40 million
- 1,590 active family practice sites (as of July 2013)
  - Many not submitting adult data
- Over 500 Urgent Cares and Walk-in Clinics in MI
  - Only 98 sites are actively submitting data to MCIR

## Working Toward a Better MCIR for Adults

### Provider

- Enter adult immunization data in a timely manner
  - Direct, transfer, HL7
- Review every adult's MCIR record at each encounter
- Update system to comply to HL7 specifications

### MDCH

- Enhance vaccine forecasting for adult vaccines
  - Priority: PCV13 and PPSV23
- Provide staff training on use of MCIR
- Move toward 2-way HL7 interface



**A CHALLENGE ONLY BECOMES AN  
OBSTACLE WHEN YOU BOW TO IT**

